

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	JL		
O.I.P.E. CLASSIFIER		19	7/7/7
FORMALITY REVIEW	SP	852	18 00
RESPONSE FORMALITY REVIEW	SP	60105	08-16-00
			1-5-00

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	7/7/7
2	✓	✓	7/7/7
3	✓	✓	7/7/7
4	✓	✓	7/7/7
5	✓	✓	7/7/7
6	✓	✓	7/7/7
7	✓	✓	7/7/7
8	✓	✓	7/7/7
9	✓	✓	7/7/7
10	✓	✓	7/7/7
11	✓	✓	7/7/7
12	✓	✓	7/7/7
13	✓	✓	7/7/7
14	✓	✓	7/7/7
15	✓	✓	7/7/7
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28	✓	✓	7/7/7
29	✓	✓	7/7/7
30	✓	✓	7/7/7
31	✓	✓	7/7/7
32	✓	✓	7/7/7
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45	✓	✓	7/7/7
46	✓	✓	7/7/7
47	✓	✓	7/7/7
48	✓	✓	7/7/7
49	✓	✓	7/7/7
50	✓	✓	7/7/7

Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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